

MANORCARE HEALTH SERVICES-EAST
600 S WEBSTER AVE

GREEN BAY 54301 Phone:(920) 432-3213
Operated from 1/1 To 12/31 Days of Operation: 366
Operate in Conjunction with Hospital? No
Number of Beds Set Up and Staffed (12/31/04): 79
Total Licensed Bed Capacity (12/31/04): 79
Number of Residents on 12/31/04: 57

Ownership: Corporation
Highest Level License: Skilled
Operate in Conjunction with CBRF? No
Title 18 (Medicare) Certified? Yes
Title 19 (Medicaid) Certified? Yes
Average Daily Census: 57

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/04)				Length of Stay (12/31/04)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		64.9
Supp. Home Care-Personal Care	No	-----	-----	-----	-----	1 - 4 Years		28.1
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	14.0	More Than 4 Years		7.0
Day Services	No	Mental Illness (Org./Psy)	14.0	65 - 74	14.0			-----
Respite Care	Yes	Mental Illness (Other)	5.3	75 - 84	26.3			100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	38.6	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	7.0	95 & Over	7.0	Full-Time Equivalent		
Congregate Meals	No	Cancer	1.8		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	10.5		100.0	(12/31/04)		
Other Meals	No	Cardiovascular	14.0	65 & Over	86.0	-----		
Transportation	No	Cerebrovascular	3.5		-----	RNs		13.7
Referral Service	No	Diabetes	10.5	Gender	%	LPNs		10.5
Other Services	Yes	Respiratory	3.5		-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	29.8	Male	40.4	Aides, & Orderlies		
Mentally Ill	No	-----	-----	Female	59.6			
Provide Day Programming for			100.0		-----			
Developmentally Disabled	Yes				100.0			

Method of Reimbursement

		Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Family Care			Managed Care				
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	% Of All	
Int. Skilled Care	0	0.0	0	3	11.5	133	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	3	5.3	
Skilled Care	18	100.0	358	21	80.8	115	6	100.0	128	7	100.0	150	0	0.0	0	0	0.0	0	52	91.2	
Intermediate	---	---	---	2	7.7	96	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	2	3.5	
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Personal Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Residential Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Total	18	100.0		26	100.0		6	100.0		7	100.0		0	0.0		0	0.0		57	100.0	

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/04				
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Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total
Private Home/No Home Health	4.7	Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Number of Residents
Private Home/With Home Health	0.9	Bathing	1.8	70.2	28.1	57
Other Nursing Homes	0.4	Dressing	10.5	70.2	19.3	57
Acute Care Hospitals	93.2	Transferring	17.5	63.2	19.3	57
Psych. Hosp.-MR/DD Facilities	0.0	Toilet Use	15.8	61.4	22.8	57
Rehabilitation Hospitals	0.0	Eating	80.7	7.0	12.3	57
Other Locations	0.9	*****				
Total Number of Admissions	234	Continence		%	Special Treatments	%
Percent Discharges To:		Indwelling Or External Catheter	12.3		Receiving Respiratory Care	15.8
Private Home/No Home Health	33.5	Occ/Freq. Incontinent of Bladder	14.0		Receiving Tracheostomy Care	0.0
Private Home/With Home Health	16.5	Occ/Freq. Incontinent of Bowel	3.5		Receiving Suctioning	0.0
Other Nursing Homes	7.2				Receiving Ostomy Care	1.8
Acute Care Hospitals	22.9	Mobility			Receiving Tube Feeding	7.0
Psych. Hosp.-MR/DD Facilities	0.0	Physically Restrained	3.5		Receiving Mechanically Altered Diets	35.1
Rehabilitation Hospitals	0.0					
Other Locations	6.4	Skin Care			Other Resident Characteristics	
Deaths	13.6	With Pressure Sores	12.3		Have Advance Directives	96.5
Total Number of Discharges		With Rashes	5.3		Medications	
(Including Deaths)	236				Receiving Psychoactive Drugs	40.4

Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Peer Group %	Ratio	Bed Size: 50-99 Peer Group %	Ratio	Licensure: Skilled Peer Group %	Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	140.9	88.5	1.59	89.0	1.58	90.5	1.56	88.8	1.59
Current Residents from In-County	86.0	80.0	1.07	81.8	1.05	82.4	1.04	77.4	1.11
Admissions from In-County, Still Residing	13.2	17.8	0.74	19.0	0.70	20.0	0.66	19.4	0.68
Admissions/Average Daily Census	410.5	184.7	2.22	161.4	2.54	156.2	2.63	146.5	2.80
Discharges/Average Daily Census	414.0	188.6	2.20	163.4	2.53	158.4	2.61	148.0	2.80
Discharges To Private Residence/Average Daily Census	207.0	86.2	2.40	78.6	2.63	72.4	2.86	66.9	3.09
Residents Receiving Skilled Care	96.5	95.3	1.01	95.5	1.01	94.7	1.02	89.9	1.07
Residents Aged 65 and Older	86.0	92.4	0.93	93.7	0.92	91.8	0.94	87.9	0.98
Title 19 (Medicaid) Funded Residents	45.6	62.9	0.72	60.6	0.75	62.7	0.73	66.1	0.69
Private Pay Funded Residents	12.3	20.3	0.61	26.1	0.47	23.3	0.53	20.6	0.60
Developmentally Disabled Residents	0.0	0.9	0.00	1.0	0.00	1.1	0.00	6.0	0.00
Mentally Ill Residents	19.3	31.7	0.61	34.4	0.56	37.3	0.52	33.6	0.57
General Medical Service Residents	29.8	21.2	1.41	22.5	1.32	20.4	1.46	21.1	1.42
Impaired ADL (Mean)	47.7	48.6	0.98	48.3	0.99	48.8	0.98	49.4	0.97
Psychological Problems	40.4	56.4	0.72	60.5	0.67	59.4	0.68	57.7	0.70
Nursing Care Required (Mean)	9.6	6.7	1.44	6.8	1.41	6.9	1.40	7.4	1.30